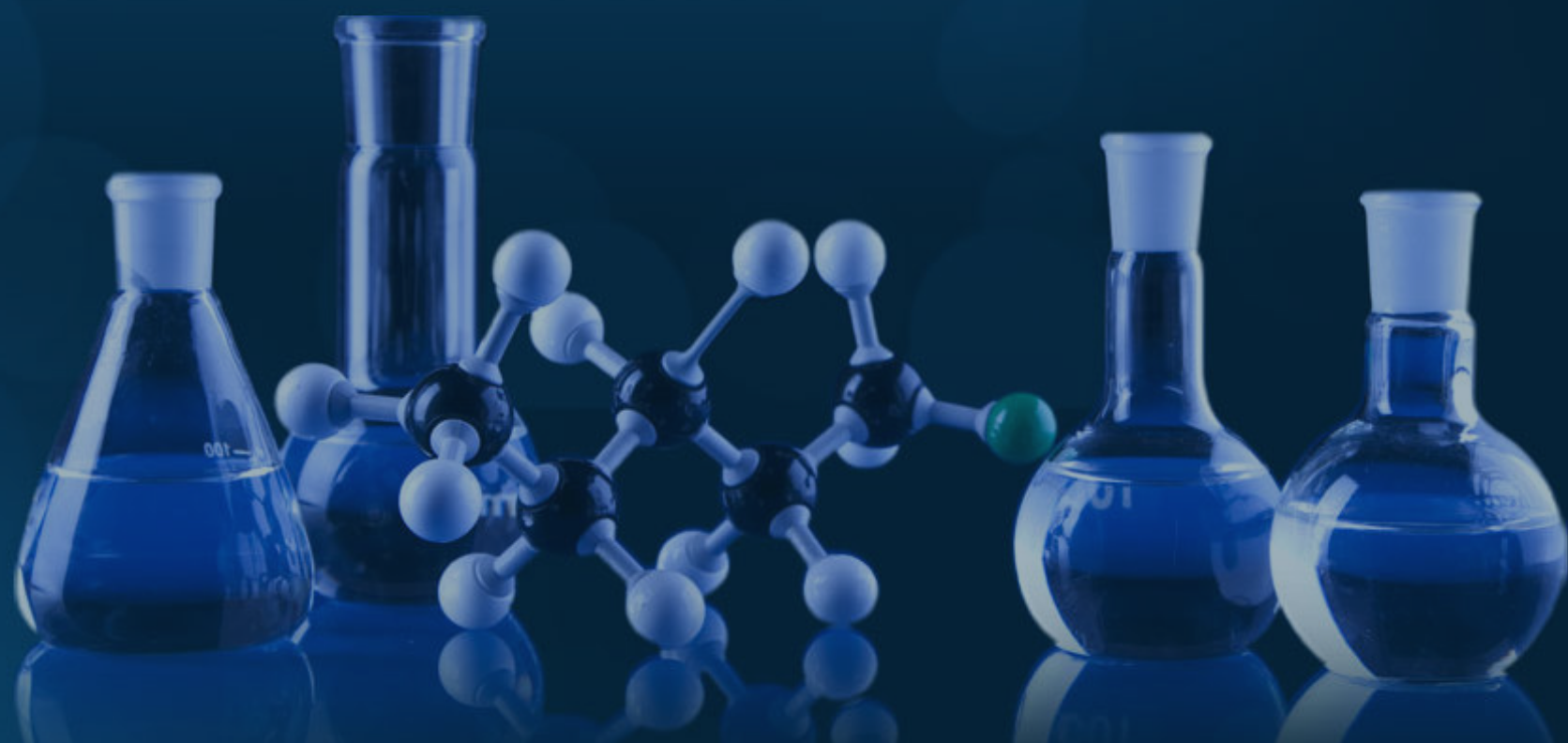




ARL is an Authority on Nutrition
and the Science of Balancing Body
Chemistry Through Hair Tissue
Mineral Analysis!

Hair Tissue Mineral Analysis



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Menopause

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Menopause

Menopause

Mrs. Walters, age 53, began to miss menstrual periods. She also began waking up at night soaked with sweat. Although her hot flashes could occur at any hour, the most annoying were at night. She also noticed some vaginal dryness and increased moodiness, irritability and fatigue. These are common symptoms of the menopause.

What Causes Menopause?

Menopause occurs in most women between the ages of 45 and 50. Natural menopause is apparently caused by 'burning out' of the ovaries. All of the primordial follicles, or eggs, are used up. Estrogen levels decrease and the menstrual cycle ceases.

Menopause may also be caused by removal of the ovaries. The common operation is a hysterectomy (removal of the uterus) with oophorectomy (removal of the ovaries). Sometimes a hysterectomy is performed, but the ovaries are left in the body. If the ovaries are removed, production of estrogen and progesterone diminish, causing the cessation of the menstrual period.

The Adrenal Glands And Menopause

The adrenal glands produce small quantities of both male and female sex hormones. Ideally, the adrenal glands will produce adequate estrogen to avoid symptoms when ovarian hormone production ceases. However, many women today have adrenal insufficiency. The causes include stress, nutritional deficiencies, and frequently copper imbalance. Without 'adrenal backup', if the ovaries cease to function for any reason, hot flashes, vaginal dryness and increased demineralization of the bones will occur.

Adrenal exhaustion may also contribute to the early cessation of menstruation that occurs in women who exercise heavily, or are nutritionally deficient.

Avoiding Symptoms Of Menopause

The standard medical treatment for menopausal symptoms is estrogen, preferably accompanied by progesterone. This is effective, but in some women causes adverse reactions. There is also concern about an increased risk of cancer due to estrogen therapy. For women who cannot or do not wish to take estrogen, nutritional approaches offer an alternative.

Nutritional methods work to restore an adequate level of hormone production. In many women, the adrenal glands are exhausted. These women are slow oxidizers. A trace mineral analysis will reveal low sodium and potassium levels in relation to the calcium and magnesium levels. A complete program to restore the adrenal glands requires vitamins A, B, C, E, zinc, manganese, and perhaps other trace minerals. Adrenal glandular substance is very helpful as well.

In addition to nutrient deficiencies, toxic metals can interfere with adrenal activity. Excessive tissue copper, mercury, or cadmium often contribute to symptoms. Excessive worry, inadequate diet, or other lifestyle factors can be important. Restoring the entire energy system may also be needed.

Extra Nutrients For Menopause

A standard hair analysis program is sufficient to stop menopausal symptoms in many women. A few, however, benefit from extra dosages of certain nutrients. Those shown to be helpful include vitamin E, copper, boron, and the herbs damiana and sarsaparilla. Extra dosages of vitamin E or boron may have to be added to the program. It is interesting to note that the nutrients mentioned have a sodium-raising effect, just as do the adrenal hormones. All are involved in the production or regulation of the adrenal hormones.

Combining an individualized nutrition program with the extra nutrients, if needed, is very effective for most cases of menopausal symptoms.

Should Estrogen Be Discontinued?

What if a woman is taking estrogen and wishes to change to a nutritional approach? She needs to realize that nutritional correction may take a few weeks to a few months. Therefore, she may wish to continue estrogen for a while to avoid symptoms.

Avoiding Osteoporosis

The most important condition related to menopause is osteoporosis. It is difficult to detect without a bone density test. This is an x-ray to detect the degree of bone demineralization. The test is highly recommended for any woman over 50, as a baseline reading. Osteoporosis is very common, particularly among slow oxidizer women.

Microcrystalline hydroxy apatite crystals (MCHC), which is a crystalline form of calcium in an organic complex along with other micronutrients our bodies need to build bone, may be added to the nutrition program if reduced bone density is detected, or just for prevention. About 4 tablets daily can be substituted in place of calcium in the program.

Can A Nutrition Program Cause Periods To Start Again?

Yes, in some instances. Early menopause, in particular, often indicates imbalanced body chemistry. If a woman is not too advanced in age, her sex glands may be rejuvenated so that they function normally. We observe this commonly in women under 40 who have stopped menstruating for no apparent reason. Over 50, it is much less likely to occur.

Are There 'side Effects' Of The Nutritional Approach?

The only side effect of a nutritional balancing program is improved overall health and energy. Often, many other health conditions will disappear as body chemistry is better balanced.

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